



*Bureau of Student and Family Support Services  
Grow Your Own Iowa Public School Speech-Language Pathologist  
Student Scholarship Opportunities*

## **TERMS AND CONDITIONS**

The Iowa Department of Education has partnered with the Iowa Area Education Agencies (AEAs) who provide speech and language services to school districts in Iowa to recruit highly qualified professionals to deliver speech-language therapy.

The Iowa Department of Education is aware of the possible impact the critical shortage of school-based speech-language pathologists (SLPs) could have on children with disabilities. We are proud to announce that we have taken action by offering four \$3,000.00 *Grow Your Own SLP School Therapy Career Scholarships\** to high performing master's level students who agree to work as SLPs in the schools after they graduate. The scholarship can be used to support the student's educational expenses including tuition, books, clinical materials, and school living expenses.

Candidates must be enrolled for full time study in the accredited graduate degree program at the University of Iowa or University of Northern Iowa and graduate by the end of the current academic school year. Candidates must request that an administrator or faculty member in the speech-language pathology department complete the attached Confidential Reference Form. References will be verified by phone prior to awarding the scholarship. Applicants must also contact and schedule a visit to one of the AEA as part of the application process (see attached AEA contact information).

Application deadline is as follows:

- February 20<sup>th</sup>, 2009 to apply for the winter 2009 Scholarships

A panel consisting of the Iowa Department of Education Speech-Language Consultant and Area Education Agency Staff will conduct reviews. Awards will be based on quality of materials submitted and all decisions are final.

Awardees must agree to work in the AEA that awards the scholarship for one year following graduation. The scholarships will be announced on or about the following date:

- March 11<sup>th</sup>, 2009 (Winter 2009 Scholarships)

\*Four students will receive one scholarship each and must agree to full-time employment in AEA 8 or AEA 15 for one year after graduation. Applicants are expected to schedule an onsite visit to each one of the AEA's as part of the application process.

## INSTRUCTIONS FOR APPLICANTS

Complete and submit the following application materials:

**[ ] Student Applicant Information Form**

**[ ] Confidential Reference Form (To be completed and submitted by a department administrator or faculty member in your university program.)**

All information must be received before the scholarship is awarded.

Awards will be based on quality of materials submitted.

Complete applications must be received by the following dates:

- February 20<sup>th</sup>, 2009 to apply for the Winter 2009 Scholarships

### **Submit completed application materials to:**

Frank Forcucci MS, CCC-SLP  
Iowa Department of Education  
Bureau of Student and Family Support Services  
400 E 14th Grimes State Office Building  
Des Moines, Iowa. 50319-0146  
Phone: 515-281-3572 Fax: 515-242-6019

Students who receive the scholarships must work within one of the following AEAs:

<p>Prairie Lakes AEA 8 PO Box 802 500 NE 6<sup>th</sup> Street Pocahontas, IA 50574 Ph 712-335-3588/Fax 712-335-5871</p> <p>Contact: Gerald Stremel Executive Director <a href="mailto:jstremel@aea8.k12.ia.us">jstremel@aea8.k12.ia.us</a></p>	<p>Great Prairie AEA 15 2814 N. Court Street Ottumwa, IA 52501 Ph 641-682-8591 ext. 2115 /Fax 641-682-9083</p> <p>Contact: Melody Raub Regional Special Education Director <a href="mailto:melody.raub@gpaea.k12.ia.us">melody.raub@gpaea.k12.ia.us</a></p>
---	---

## **STUDENT APPLICANT INFORMATION FORM**

**Applying for: Winter 2008**

**Due: February 20<sup>th</sup>, 2009**

**Student Name:**

**Preferred Mailing Address:**

**Daytime Phone Evening or Mobile Phone:**

**E-mail address:**

**Attending University:**

**University Contact Information (City, State, Zip, Phone):**

**Anticipated Date of Degree Completion (Month/Year) Degree Title**

**G.P.A.**

**Clinical experiences to date, including within the school setting:**

**What are the primary rewards and challenges for SLPs who work in the school setting?**

**What is your personal vision of your professional career as a school-based SLP?**

**Please briefly describe your visit to AEA 8 or AEA 15 and why you would enjoy being a part of their SLP staff:**

I certify that, to the best of my knowledge, the information submitted in this application is accurate. I also certify that I have read and understand the Terms and Conditions of the scholarship competition.

---

**Applicant Signature**

**Date**

*Iowa Department of Education  
Grow Your Own Iowa Public School  
Speech-Language Pathologist Scholarship Opportunities*

**CONFIDENTIAL REFERENCE FORM  
SPEECH-LANGUAGE PATHOLOGY**

Dear Program Administrator/Instructor:

The Iowa Department of Education and Iowa Area Education Agencies are committed to encourage graduate students who are majoring in speech-language pathology to select the public school setting as their primary place of employment. We are proud to announce that we are taking action by offering \$3,000.00 scholarships to four master's level students who agree to work in the schools after they graduate at the end of this current school year.

***Please complete and return this confidential reference to:***  
CCC-SLP

Frank Forcucci M.S.,

Iowa Department of Education  
Bureau of Student and Family Support Services  
400 E 14th Grimes State Office Building  
Des Moines, Iowa. 50319-0146  
515-281-3572  
[Frank.Forcucci@iowa.gov](mailto:Frank.Forcucci@iowa.gov)

**University:**

**Name:**

**Title:**

**Is your program accredited by the American Speech-Language-Hearing Association?**

**Is this student pursuing a master's degree in your program?**

**Is the student in good academic standing within your program?**

**Will the student be enrolled full-time in the program during the term for which he or she is applying for the "Iowa Grow Your Own SLP Scholarship"?**

**Has this student expressed a serious interest in a career in the school setting?**

**Has this student taken coursework to prepare him or her for the school setting?**

**Does the student possess the qualifications and skills to succeed in the school setting?**

**Would you recommend this student for the "Iowa Grow Your Own SLP Scholarship"?**

**Briefly describe why you believe this student qualifies for this scholarship.**

**I certify that, to the best of my knowledge, the information submitted in this reference is accurate.**

---

**Signature**

**Date**